



OYO STATE GOVERNMENT

GRIEVANCE REDRESS MECHANISM (COMPLAINT FORM/001)

Details of the Complainant:

Name.....

Phone no.:Email Address:

Vehicle number:Date of Complaint:

Type of Complaint:

Responsible MDA :.....

Description of the Complaint:

Harassment		Unauthorized Payments		Other in-kind request	
------------	--	-----------------------	--	-----------------------	--

Attachment of Relevant Evidence

Attachment: (1)_____ (2)_____

(3)_____

Amount lost:

Name of Responsible Party:

Date of Response to Complaint:



OYO STATE GOVERNMENT

GRIEVANCE REDRESS MECHANISM (COMPLAINT FORM/002)

Name of Exporter/ Trade.....

Details of the Complainan

Name:

Phone no.: Email Address:

Vehicle number:Date of Complaint:

Type of Complaint:

Description of the Complaint:

Open		Ongoing Investigation		Resolved	
------	--	-----------------------	--	----------	--

MDA Working on case:

Date of response:

Solvency Mechanism Used:

Action Of Redress: